FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 659684

(5)

RALEIGH - PARKER ENTERPRISES, INC.

FILED Jan 29 1997 8:00am Secretary of State

Principal Place of Business					Mailing Address						1	n indate Ettint anten inten Ottila tatta Esti Ott		THE MARKET BAC	/(I BIBI) (BB)
823 NORTH FEDERAL HIGHWAY C/O CHARLES S. DALE. JR. FT. LAUDERDALE FL 33304					623 NORTH FEDERAL HIGHWAY C/O CHARLES S. DALE. JR. FT. LAUDERDALE FL 33304-4645										
											3.	Date Incorporated or Qualified 03/19/1980		e of Last 0/1996	
2. Principal P	ace of Bus	ness	THE PERSON NAMED IN COLUMN TO PERSON NAMED I	2a.	2a. Mailing Address						4.	. FEI Number			Applied For
21				26	26						<u>. </u>	59-1997910		T I	Not Applicable
Suite, Apt.	#, etc.				Suite, Apt #, etc.						-	Certificate of Status Desired	<u> </u>	\$8.75	Additional
22				27						·		. Continuate of Glados Desired L		Fee	Required
City & State	е				City & State						6.	Election Campaign Financing	_	\$5.0	O May Be
23					28						<u> </u>	Trust Fund Contribution		Adde	d to Fees
Zip	Country							Country		8.	. This corporation has liability for inta	ngibl <u>e t</u> a	ax under	s. 199.032,	
24	25		***************************************	29		30	30			Florida Statutes					
			Address of Currer	nt Regis	lered Age	nt			·····		10.	Name and Address of New Regis	tered A	gent	
	e, Charl							81	Na	ame					
623 NORTH FEDERAL HIGHWAY								82 Street Address (P.O. Box Number is Not Acceptable)							
FT.	LAUDERD/	ALE I	L 33301								TOO (1 TO DON TO THOU PROOPING)				
								83							
								84	Ci	ity			FL	85 Ziç	p Code
11. Pursuant	to the provis	sions	of Sections 607 050	02 and 6	07.1508. F	lorida Statu	tes. the	above	e-na	med corpo	ratio	on submits this statement for the pure		hanging	its registered
office or r	egistered ag	gent, d	or both, in the State	of Flori	da Such c	hange was	authori	zed by	y the	corporation	on's l	on submits this statement for the purp board of directors. I hereby accept t	he appoi	ntment a	as registered
	in ia:milai W	nur ar	to accept the oblig	ations o	i, section t	507.0505, FI	iorida S	latutes	S.						
SIGNATURE	Signature types	l or prin	ted name of registered age	ent and toe	if anci-cable	(NO	TE: Regist	ered Age	ent slo	nature require	d wher	en reinstalino)	DATE		********
12. OFFICERS AN								13.				ADDITIONS/CHANGES TO OFFICER		DIRECTO	ORS IN 12
THILE	DS			DELETE			1.	1.1 TITLE						Change	Addition
NAME	RALEIGH	1, JO	an s.				1.3	2 NAME						•	
STREET ADDRESS 623 N FEDERAL HWY								1.3 STREET ADDRESS							
CITY-ST-ZiP	FT LAUC	DERD	ALE, FL 00000					4 CITY - S							
TITLE	DP					DELETE		1 TITLE	1. 511			······································		Change	e Addition
NAME	RELEIGH	i. JA	CK			•		2 NAME					_		
STREET ADDRESS			TAL HWY					3 STREET	LADUE	DE SC					
CITY-ST-ZIP			ALE, FL 00000					4 CITY-S							
TITLE						DELETE		1 TITLE	31.Tu				: [Charge	e Addition
NAME					-			2 NAME						wat accounting	tone ranticipi
STREET ADDRESS															
								3 STREET							
CITY-ST-ZIF TITLE						DELETE		4. CITY - : 1 Title	\$1.71	P			······································	Change	e Addition
					_	Journ		2 NAME					L.	, Undingo	, Lan Addition
NAME Aroter Leaders															
STREET ADDRESS								3 STREET							
CITY-ST-ZIP					-	DELETE		4 CITY - S	r-ZIP	-				70	A statistics
TITLE					L	PDECEIE		1 TITLE					L	Change	Addition
NAME								2 NAME				•			
STREET ADDRESS								3 STREET							
CITY - ST - ZIP	,					I DELETE		CITY-S	ST- ZIP	,					
TITLE					L	DELETE		1 TITLE					L	Change	Addition
NAME								2 NAME							
STREET ADDRESS							6.0	3 STREET	ADDF	RESS					

64 CITY-ST-ZIP

14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed or on an attachment with an address.

SIGNATURE:

INMILITE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTO

1-23-4 Dale

954-764-1436